

AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(Check Applicable Box)

☐

FEDERAL CANDIDATE

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STATE/LOCAL CANDIDATE

**To Avail Themselves of The Lowest Unit Charge During a Political
Window, Federal Candidates Must Sign The Certification On Page 3**

Station and Location:**Date:**I, Nicole Meade - Media Placement Technologies

, being/on behalf of:

Rob McKenna, a legally qualified candidate of theRepublicanparty for the office of: Governor of Washingtonin the General election to be held on:11/6/2012

do hereby request station time as follows:

Broadcast Length	Time of Day Rotation or Package	Days	Class	Time Per Week	Number of Weeks
	SEE ATTACHED				

Total Charges:

For programming that, in whole or in part, "communicates a message relating to any political matter of national importance," list the matters below:

I represent that the payment for the above described broadcast time has been furnished by:

Rob McKenna for Governor _____ and you are authorized to announce the time as paid for by
such person or entity. I represent that this person or entity is either a legally qualified candidate or an authorized
committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:

To Be Signed By Candidate of Authorized Committee

09/20/2012

Nicole Meade -

Date

Signature

To Be Signed By Station Representative

☐

Accepted

☐

Accepted in Part

☐

Rejected

Signature

Print Name

Title

CANDIDATE CERTIFICATION

**In Order For Federal Candidates to Receive The Lowest Unit Charge During a
Political Window, the Following Certification is Required:**

I, Rob McKenna _____ (name of federal candidate or authorized committee)

hereby certify that the programming to be broadcast (in whole or in part) pursuant to this agreement:

☐

Does

☐

Does Not

refer to an opposing candidate (check applicable box). I further certify that for the programming that does
refer to an opposing candidate (check applicable box):

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the **radio** programming contains a personal audio statement by the candidate that
identifies the candidate, the office being sought, and that the candidate has approved
the broadcast.

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the **television** programming contains a clearly identifiable photograph or similar image of
the candidate for a duration of at least four seconds, and a simultaneously displayed
printed statement identifying the candidate, that the candidate approved the broadcast,
and that the candidate and/or the candidate's authorized committee paid for the broadcast.

Signature of Candidate or Authorized Committee

Nicole Meade

Print Name

AGREED UPON SCHEDULE

(TO BE FILLED IN ONLY IF STATION DOES NOT ACCEPT ALL OF
CANDIDATE'S REQUEST)

Broadcast Length	Time of Day Rotation or Package	Days	Class	Time Per Week	Number of Weeks

Total Charges:

AFTER AIRING OF BROADCASTS:

Attach invoices or Schedule Run Summary to this Form showing:

- (1) actual air time and charges for each spot;
- (2) the date(s), exact time(s) and reason(s) for Make-Good(s), if any; and
- (3) the amount of rebates given (identify exact date, time, class of broadcast and dollar amount for each rebate), if any.

Note: Because the FCC requires that the political file contain the actual times the spots air, that information should be included in the file as soon as possible. If that information is only generated monthly, the file should include the name of a contact person who can provide the times that specific spots aired.